



# Missouri Future Business Leaders of America

## OFFICIAL ENTRY FORM

### NATIONAL TRAVEL FUND DONATION

Please return this form along with your **check** made out to **Missouri FBLA** postmarked by **March 17** so that your chapter will be eligible for the National Travel Fund. You do not need to fill out this form if you participated in one of the state approved fundraisers and your donation is at least \$125.

#### PLEASE NOTE:

*If the amount that is being contributed to the state by the fundraising company for your school's fundraiser does not total \$125, you may donate an amount that will be added to the company's contribution. The total contribution must be \$125.00.*

#### CHAPTER INFORMATION:

DISTRICT :	CHAPTER NAME:	ADDRESS/CITY/STATE/ZIP:
PHONE:	SUBMITTED BY:	

#### PAYMENT OPTIONS:

Payment Enclosed: <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Expected Payment Date of _____
<input type="checkbox"/> Amount of National Travel Fund Donation: \$_____

**RETURN THIS FORM BY POSTMARKED DATE OF MARCH 17:**

**Custom Meeting Planners (CMP)**

**PO Box 30785**

**Columbia, MO 65205**

**FAX: (573) 445-1831 or E-MAIL: [FBLA@SOCKET.NET](mailto:FBLA@SOCKET.NET)**

**Make check payable to Missouri FBLA**